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Dr. Paul O'Brien Oral History 2005

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Paul O'Brien Interview
Conducted by: Carl Kupfer
May 16, 2005

Dr. Kupfer: I have asked Dr. O'Brien to reminisce about the beginning of the Intramural Program that was referred to as the Ophthalmology Branch. First of all Paul, I think it's important to realize that the NINDB came into being in 1950 but no presence of ophthalmic research occurred until 1955. And I'd like you to sort of think back to when you first arrived and what things were like in terms of space and funding and then what occurred during the period that you were there. Let's start with the date that you arrived.

Dr. O'Brien: First of all I came to NIH in 1960, in the fall of 1960 in what was then the Arthritis Institute. And I moved into the Ophthalmology Branch of the NINDB in the fall of 1964. So I was there for—I guess that would be six years before the Eye Institute actually started to function. And in that time the budgets were not really something we even discussed. We could request items and we could make purchases as long as purchases were small, that was fine. Toward the end of the fiscal year since I was located across the hall from Glen Hammond's office, he was the Budget Officer for the Neurology Institute. He would sometimes come to me and say if you can buy something for \$10,000 in the next two days you can have it, so I got an ultracentrifuge and one or two other major pieces of equipment that way with year-end budgeting. But for the most part it was the day to day costs were probably minimal because we never saw our budget for the branch, for the section I was in. And that persisted pretty much exactly the same way for those six years. The other personnel in the branch did not fluctuate except as a clinical associate would, conduct a few experiments in addition to his clinical duties. Elliott Berson certainly used part of my laboratory to do so. For the most part each of these sections more or less operated independently. We would go do research, we had weekly laboratory meetings and we would make presentations of our work. Dr. Von Sallmon was very supportive of the basic research people but did not get directly involved in any way other than attending these seminars. He was pretty much concerned with operating an efficient service on 13.

Dr. Kupfer: Right. Clinical research, which of course was outstanding, they did a superb job. So during the period you were there—the six years, was there any increase in your space allocation or did things stay the same?

Dr. O'Brien: No, no there was not. I guess the only increase might be that little cold room across the corridor from where I was. It was a little tiny area it was dug out of a module, that was from Ernst Freese's group and his people weren't using it.

Dr. Kupfer: Um-hum.

Dr. O'Brien: And so I simply asked if I could use this place and I used that as my cold . It was probably 6X10 at most and that was the room I papered over with black plastic to use as a dark cold room.

Dr. Kupfer: Did those of you in the ophthalmology Branch feel that you were part of the NINDB Intramural Program or was there a separation between those who were...

Dr. O'Brien: Well, no I think we all had a good working relationship with Karl Frank who was the Scientific Director and we kept in touch about what was going on so we were pretty well integrated with NINDB.

Dr. Kupfer: Now when the NEI finally was created was there any discussion as to who would remain in the Neurology Institute and who would move over to the NEI?

Dr. O'Brien: Well, I think most of us assumed that we would move over into the NEI but a couple of individuals such as Mike Fuortes and Arnaldo Lasansky were invited to stay with NINDB. I guess Ralph Nelson...

Dr. Kupfer: He was with Peter Gouras and then when Peter left there was no longer a section so he went right into Neurology.

Dr. O'Brien: Right, he moved over into Neurology, yes that's what it was.

Dr. Kupfer: Right.

Dr. O'Brien: I think only Lasansky and Fuortes were in the initial transfer—were the ones that moved.

Dr. Kupfer: Right. So the interaction with the Neurology Intramural Program was reasonably good.

Dr. O'Brien: It was.

Dr. Kupfer: You didn't feel that you were second-rate citizens or anything like that.

O'Brien: Not really, uh, some of us were involved with the investigative organization—the Assembly of Scientists.

Dr. Kupfer: Um-hum.

Dr. O'Brien: So we were in the Assembly of Scientists of the NINDB interacting with other people. But our interaction was strictly at that level. I don't think too many people had working relationships with other scientists in NINDB—people within the branch. I guess there may have been some cases. I guess the Columbres may have had some outside activities. I think the basic research people within the Ophthalmology Branch pretty much stayed within their branch and stayed on the outside the larger NINDB community.

Dr. Kupfer: Now the publicity for a new institute started about 1964 and really reached a crescendo in '66 and then by '68 it was a done deal.

Dr. O'Brien: It had legislation by then.

Dr. Kupfer: Was there much awareness of all of this going on in the Neurology Institute?

Dr. O'Brien: Um, there was...

Dr. Kupfer: Intramural.

Dr. O'Brien: Yes, they were certainly at the point when legislation was being considered because then there was something to take note of and there was testimony to read and things of that sort. I think the—at least to my recollection I think that most of the people within the branch felt that this as a good thing and it would benefit them in the long-run. But then that's always the case when a new institute is suggested.

Dr. Kupfer: Right. Sure. So that when the NEI became a reality this was sort of expected, there was enough pressure being brought to bear on the outside and you were aware of that and that sort of thing.

Dr. O'Brien: We were aware of the testimonies that were made.

Dr. Kupfer: Right, right. Okay, good. Were there any discussions going on between the Neurology people and the Ophthalmology people with respect to this?

Dr. O'Brien: There may have been at the level of Dr. Von Sallman but not among the investigators.

Dr. Kupfer: But not at your level, okay.

Dr. O'Brien: We really didn't have anything to do with it.

Dr. Kupfer: Right. Well now I remember a meeting and you know this is a little awkward because—first of all I'm no longer the Director of the NEI so you can say whatever you want. (Laughter) But I really have to know how people felt because it's really a very emotional period as you well know.

Dr. O'Brien: Oh, it was, it was.

Dr. Kupfer: And I remember the first thing that I did in the few days that I was there after we got over the question of what would be transferred from Neurology to Ophthalmology was to convene a meeting with all the Intramural Scientists in Room 10 of Building 31C, do you remember that?

Dr. O'Brien: I do remember, yeah.

Dr. Kupfer: I must say that there was some who really didn't know who I was or what I was up to...a relief.

Dr. O'Brien: I think there was a lot of apprehension.

Dr. Kupfer: A tremendous amount of apprehension.

Dr. O'Brien: Nobody knew what was going to happen particularly with section structures and things of that sort, people were concerned that they might lose some of their autonomy.

Dr. Kupfer: Do you recall what the feeling was after that meeting was over?

Dr. O'Brien: I don't recall any particularly negative feeling, this was an organizational time and I think everybody as I said was probably concerned about what their future was within the new Institute. But I don't think I heard any feelings that this was a bad thing and that we were going to regret it or anything of that sort. It was more—well, viewed more as an opportunity.

Dr. Kupfer: Right. Well let's jump ahead say six to twelve months, the first year. What was the impression of the scientists, you, Mark Lewis, Peter Gouras. I guess the question I'm really aiming at is what was the perception of how the Intramural Program was viewed by the new management if you will of the NEI?

Dr. O'Brien: Oh, I think there was a certain amount of relief that you had a great deal of interest in what was going on intramurally. Being left high and dry to your own devices uh is awkward and it makes you feel vulnerable but it was good to hear that you were interested in specific projects and what people were doing and wanted to know about it.

Dr. Kupfer: Um-hum.

Dr. O'Brien: And I think people felt pretty good about that. Again, there was all this apprehension about what was going to become of this because we didn't know whether you were accumulating all this information in order to axe people (laughter) or no one knew what was going on so there was apprehension there. But at least this was an administration that was interested in what was going on in the laboratory.

Dr. Kupfer: Of course the move to Building 6 should have been a very positive.

Dr. O'Brien: Yes it was. It provided additional space for many people. Much better laboratories.

Dr. Kupfer: Renovated building.

Dr. O'Brien: Renovated building, um, many of the labs in Building 10 were old and hadn't been remodeled in probably decades and they may have been inherited from some other group and you just used what was there and lived with it. So this allowed people to design a laboratory that was more appropriate for the kind of work they were doing and that was a very good thing. There was a lot of enthusiasm for Building 6.

Dr. Kupfer: Well then during the first two or three years, things were pretty stable.

Dr. O'Brien: They were.

Dr. Kupfer: And uh—except for the first year where our budget was almost non-existent then it began to really grow. Resources became available I trust.

Dr. O'Brien: Yeah, I think they did. I think it got to a point where we weren't really concerned that we weren't going to be able to do our work. We still weren't too close to budgets.

Dr. Kupfer: Well (chuckle), Scientific Directors don't like to give out information about the budget.

Dr. O'Brien: Right. (Laughter) that's right.

Dr. Kupfer: Jin Kinoshita was the first Scientific Director who I think really uh, appreciated the importance taking care of the researcher. And of course that was my philosophy learned when I was in the Howe Laboratory with Dave Cogan who was that sort of person. But uh, it is difficult—the Scientific Directors at NIH do like to keep their cards close.

Dr. O'Brien: Keep it close to the vest absolutely.

Dr. Kupfer: ...to the chest and don't let anyone know how much money is going around.

Dr. O'Brien: Well that was a coup bringing Jin and Toichi and Dave...that was a major advance.

Dr. Kupfer: Oh yeah.

Dr. O'Brien: People were very happy about that it was going to be good for us and it was.

Dr. Kupfer: Yes, it was very good.

Dr. O'Brien: It was very good. Brought instant prestige to a group of dispirited people who didn't have much of a collective identity in ophthalmology.

Dr. Kupfer: Okay, well I guess then that the bottom line is what really was the Intramural Program primarily was a service organization, seeing consults and doing very nice clinical descriptions of conditions and that was well done.

Dr. O'Brien: Right, Right. A very good group of clinical associates, very talented people.

Dr. Kupfer: And the intramural scientists who were in the laboratory really were just sort of left to their own devices it.

Dr. O'Brien: It was just a very academic sort of atmosphere where people more or less went along their own way doing the kind of research they were interested in.

Dr. Kupfer: Was it any pressure?

Dr. O'Brien: There wasn't any pressure or thought of relating this work to a clinical problem that came later. I mean people—not pressure, but people I think gradually became aware that if this was to have any meaning we've got to start looking at the implications. A lot of us got into the retinitis pigmentosa questions and began to see you know maybe we do have something here that will help solve the problems.

Dr. Kupfer: And that makes a very successful story.

Dr. O'Brien: Oh yeah, I think it does. Yeah, it does.

Dr. Kupfer: Let me ask you a final question. Looking back were there things that you felt should not have been done and are there things that you would liked to have seen done?

Dr. O'Brien: Um, remember (laughter) initially we had these weekly meetings and I know I gave you a hard time occasionally (laughter).

Dr. Kupfer: I don't remember so it couldn't have been that hard.

Dr. O'Brien: Oh yeah, no, no it was a good idea because things were changing so rapidly that it was very useful for us to hear what was happening so rapidly and what the developments were but there would be some weeks when there wasn't a whole lot to talk about. So I started to say well then why do we have to meet when we have nothing to talk about? I figured you probably thought I was a rabble-rouser, giving you a lot of trouble and I needed to be on a short leash.

Dr. Kupfer: Yeah.

Dr. O'Brien: But I think that was, in retrospect, a good thing to do because things were changing so rapidly and we got to know more about administration of an institute.

Dr. Kupfer: Did the other intramural scientists feel that it was worth being exposed to this?

Dr. O'Brien: I think so yeah, in general. They'd probably agreed with me that I'd rather be in the lab, finishing an experiment.

Dr. Kupfer: Sure, yeah, yeah.

Dr. O'Brien: This was just antsy people (laughter).

Dr. Kupfer: Well, just to give you a little perspective, I think in the 30 years that I was Director there must have been no more than 10 staff meetings.

Dr. O'Brien: Is that right? (laughter)

Dr. Kupfer: I don't believe in staff meetings. But I felt it was important for me to really show the Intramural scientists that they were number one which has always been the case.

Dr. O'Brien: Right, right. And you made that very clear.

Dr. Kupfer: And that was the only way I could do it. And I gave up time.

Dr. O'Brien: And I think it was well worth it.

Dr. Kupfer: Yeah. That's interesting.

Dr. O'Brien: I think the people stayed loyal to the Institute I don't think they were leaving.

Dr. Kupfer: Okay, so—nothing that you think could have been done better. Well, maybe there is something.

Dr. O'Brien: Well, you can always do something better. Every personnel decision, every little this, every little that had to go through your office for approval.

Dr. Kupfer: See that was the only way I could learn.

Dr. O'Brien: I know, I know.

Dr. Kupfer: I had never worked for the federal government before (laughter). And uh...

Dr. O'Brien: If only you'd known...(laughter).

Dr. Kupfer: ...it was only a matter of knowledge and that was the only commodity that kept you alive.

Dr. O'Brien: One of the most valuable people was Lou Napper.

Dr. Kupfer: Sure. Absolutely.

Dr. O'Brien: Because Lou knew his way around the system.

Dr. Kupfer: Absolutely.

Dr. O'Brien: And we had people in the Neurology Institute, Glen Hammond and particularly the two secretaries in his office and they knew every trick and they could get anything done that you needed to get done. Every organization in the federal government needs people like that. They'd been there 20 years and if it doesn't work by path A, we know we can try path B, and there's always a path C.

Dr. Kupfer: That's right.

Dr. O'Brien: And they always knew how to get things done and Lou was great.

Dr. Kupfer: That's right.

Dr. O'Brien: He could get anything done.

Dr. Kupfer: Oh I know that.

Dr. O'Brien: And that was a valuable, valuable person.

Dr. Kupfer: I just wish he would have stayed on. We wanted to send him back to college. We wanted to get him into—because he would have made a great Executive Officer.

Dr. O'Brien: Oh absolutely. Yeah, absolutely he would have. I don't know—it makes you just...

Dr. Kupfer: He had fun...

Dr. O'Brien: Yeah, you should do what you want to do.

Dr. Kupfer: Yeah. Okay Paul, well I'm going to turn this off.

End of Interview